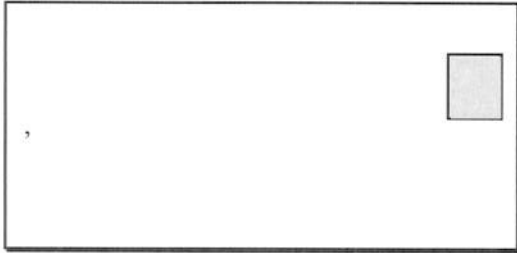


**Travel & Expense Account  
Transmittal Sheet**

**After Approval, Mail Receipts To**



Employee Name	<u>KERNAN, Scott</u>
Expense Dates	<u>02/01/10-02/01/10</u>
Total Expense Amount	<u>65.00</u>
Amount Due Employee	<u>65.00</u>
Form ID	<u>TEA000607253</u>

**DIRECTIONS FOR SUBMISSION**

1. *Attach the following receipts, and other appropriate documentation to this Transmittal Sheet.*

	Date	Expense Item	Amount	If not submitted - Explain
1)	02/01	Transit Subsidy	65.00	

2. *Forward Transmittal Sheet and attached documentation through your approval process.*

I have reviewed the following documents.

Approved  
by:

  
Brett H. MORGAN

## Travel & Expense Account Summary

Employee Name                      Scott KERNAN  
Expense Dates                      02/01/10-02/01/10  
Report Name                        5700 February 2010

Request Total    \$        65.00  
Direct Charge Total   -        0.00  
Travel Advances   -        0.00  
Net Due Employee = 65.00

Trip Totals		
Trip/Expense Category	Trip Name	Total Amount
Non-Travel Expenses	Light Rail	65.00

NOTE: (d)=Direct Charge

DATE	Mon Feb 1									TOTAL
Transit Subsidy	65.00									65.00
TOTALS \$	65.00									65.00

<b>Travel &amp; Expense Account Summary &amp; Detail</b>
--

<b>Trip/Expense Category</b>	<b>Trip Name</b>	<b>Date</b>	<b>Expense Item</b>	<b>Amount</b>	<b>Payment Type</b>
Non-Travel Expenses	Light Rail	02/01/10	Transit Subsidy	65.00	Cash

CITY OF FOLSOM  
\*\*\* CUSTOMER RECEIPT \*\*\*  
Date: 2/01/10 05 Receipt no: 149064

Description	Quantity	Amount
TK LIGHT RAIL TICKETS	1.00	\$100.00

Trans number: 2775229  
G/L account number: 51900002010600  
FEB MONTHLY PASS

Tender detail		
CK CHECK	8104	\$100.00
Total tendered		\$100.00
Total payment		\$100.00

Trans date: 2/01/10 Time: 14:23:49

THANK YOU FOR YOUR PROMPT PAYMENT

# FEB



Regional Transit

## 2010

**Travel & Expense Account  
Transmittal Sheet**

**After Approval, Mail Receipts To**

HEADQUARTER ACCOUNTING  
P.O. Box 187019  
Sacramento, CA 95818



Employee Name	<u>KERNAN, Scott</u>
Expense Dates	<u>02/03/10-02/10/10</u>
Total Expense Amount	<u>490.04</u>
Amount Due Employee	<u>490.04</u>
Form ID	<u>TEA000608084</u>

**DIRECTIONS FOR SUBMISSION**

1. *Attach the following receipts, and other appropriate documentation to this Transmittal Sheet.*

	Date	Expense Item	Amount	If not submitted - Explain
1)	02/03	Lodging	94.13	
2)	02/04	Lodging	94.14	
3)	02/09	Lodging	117.77	
4)	02/10	Parking, Auto	18.00	

2. *Forward Transmittal Sheet and attached documentation through your approval process.*

I have reviewed the following documents.

Approved  
by:

  
Brett H MORGAN

## Travel & Expense Account Summary

Employee Name                      Scott KERNAN  
Expense Dates                      02/03/10-02/10/10  
Report Name                        5700 February 2010

Request Total    \$      490.04  
Direct Charge Total   -      0.00  
Travel Advances   -      0.00  
Net Due Employee =    **490.04**

Trip Totals		
Trip/Expense Category	Trip Name	Total Amount
Regular Travel	Torricon	193.77
Regular Travel	Sheriff's Mtg	296.27

NOTE: (d)=Direct Charge

DATE	Wed Feb 3	Thu Feb 4	Fri Feb 5							TOTAL
Lunch	10.00	10.00	10.00							30.00
Dinner	18.00	18.00	18.00							54.00
Lodging	94.13	94.14								188.27
Incidentals		6.00	6.00							12.00
Breakfast		6.00	6.00							12.00
<b>TOTALS \$</b>	<b>122.13</b>	<b>134.14</b>	<b>40.00</b>							<b>296.27</b>

DATE	Tue Feb 9	Wed Feb 10								TOTAL
Dinner	18.00	18.00								36.00
Lodging	117.77									117.77
Breakfast		6.00								6.00
Lunch		10.00								10.00
Incidentals		6.00								6.00
Parking, Auto		18.00								18.00
<b>TOTALS \$</b>	<b>135.77</b>	<b>58.00</b>								<b>193.77</b>

## Travel & Expense Account Summary & Detail

Trip/Expense Category	Trip Name	Date	Expense Item	Amount	Payment Type
Regular Travel	Sheriff's Mtg	02/03/10	Lunch	10.00	Cash
Regular Travel	Sheriff's Mtg	02/03/10	Dinner	18.00	Cash
Regular Travel	Sheriff's Mtg	02/03/10	Lodging	94.13	Cash
Regular Travel	Sheriff's Mtg	02/04/10	Lunch	10.00	Cash
Regular Travel	Sheriff's Mtg	02/04/10	Dinner	18.00	Cash
Regular Travel	Sheriff's Mtg	02/04/10	Incidentals	6.00	Cash
Regular Travel	Sheriff's Mtg	02/04/10	Lodging	94.14	Cash
Regular Travel	Sheriff's Mtg	02/04/10	Breakfast	6.00	Cash
Regular Travel	Sheriff's Mtg	02/05/10	Breakfast	6.00	Cash
Regular Travel	Sheriff's Mtg	02/05/10	Lunch	10.00	Cash
Regular Travel	Sheriff's Mtg	02/05/10	Dinner	18.00	Cash
Regular Travel	Sheriff's Mtg	02/05/10	Incidentals	6.00	Cash
Regular Travel	Torrico	02/09/10	Dinner	18.00	Cash
Regular Travel	Torrico	02/09/10	Lodging	117.77	Cash
Regular Travel	Torrico	02/10/10	Breakfast	6.00	Cash
Regular Travel	Torrico	02/10/10	Lunch	10.00	Cash
Regular Travel	Torrico	02/10/10	Dinner	18.00	Cash
Regular Travel	Torrico	02/10/10	Incidentals	6.00	Cash
Regular Travel	Torrico	02/10/10	Parking, Auto	18.00	Cash

**PASO ROBLES INN**

1103 SPRING STREET

PASO ROBLES, CA 93446

Phone: 805-238-2660

FAX: 805-238-4707

Account: 267226

Arrival: 02/03/10

Departure: 02/04/10

Room: 0405

Rate: 84.00

**KERNAN, SCOTT**

1515 S STREET

SACRAMENTO, CA 95811

DATE	ITEM DESCRIPTION	COMMENT	DEBIT	CREDIT
2/3/2010	1 ROOM CHARGES	#0405 KERNAN, SCOTT	\$84.00	
2/3/2010	2 ROOM TAX	ROOM TAX	\$8.40	
2/3/2010	3 TOURISM ASSESSMENT	TOURISM ASSESSMENT	\$1.68	
2/4/2010	4 VISA	#0405 KERNAN, SCOTT		(\$94.08)
			<b>BALANCE DUE:</b>	<b>\$0.00</b>





EMBASSY SUITES  
 HOTELS®

Name & Address

KERNAN, SCOTT  
 1515 S STREET, SUITE 502-SOUTH  
 SACRAMENTO, CA 95811  
 US

Room 443/KNGN  
 Arrival Date 2/4/2010 5:16:00PM  
 Departure Date 2/5/2010  
 Adult/Child 1/0  
 Room Rate \$84.00

RATE PLAN S-GVS  
 HH#

Confirmation: 85075282

2/5/2010 PAGE 1

Rates subject to applicable sales, occupancy, and other taxes. Please do not leave any money or items of value unattended in your room. A safety deposit box is available in the lobby. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. "I have requested weekday delivery of USA TODAY. If refused, a credit of .75¢ will be applied to my account." In the event of an emergency, I, or someone in my party, require special evacuation assistance due to a physical disability. Please indicate yes by checking here: ☐  
**NOTICE TO DEBIT CARD USERS:** Please be advised that Embassy Suites Hotel® is not responsible for any overdraft caused by funds held by your bank to cover room and tax, plus estimated incidental amount of \$50.00 per day for your entire stay. Your bank will hold the funds for a minimum of three (3) business days from your checkout date.

Signature

T  
H  
A  
N  
K  
Y  
O  
U

DATE	REFERENCE	DESCRIPTION	AMOUNT
2/4/2010	1855581	GUEST ROOM	\$84.00
2/4/2010	1855581	OCCUPANCY TAX	\$8.40
2/4/2010	1855581	CALIFORNIA TOURISM ASSESSMENT	\$0.05
2/4/2010	1855581	SLO CITY TOURISM ASSESSMENT	\$1.68
		WILL BE SETTLED TO VS *8085	\$94.13
		EFFECTIVE BALANCE OF	\$0.00
ESTIMATED CURRENCY TOTAL			

COUNT NO.
RD MEMBER NAME
ESTABLISHMENT NO. & LOCATION
RD MEMBER'S SIGNATURE

DATE OF CHARGE	FOLIO NO. / CHECK NO.
AUTHORIZATION	INITIAL
PURCHASES & SERVICES	
TAXES	
TIPS & MISC.	
TOTAL AMOUNT	0.00

COMMERCE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE RESOLD OR RETURNED FOR A CASH REFUND.

PAYMENT DUE UPON RECEIPT - 1.5% PER MONTH INTEREST CHARGE WILL BE APPLIED TO ALL PAST DUE INVOICES.

PASO ROBLES INN  
1103 SPRING STREET  
PASO ROBLES, CA 93446  
Phone #: 805-238-2660

**Deposit Required**  
**Reservation Confirmation**  
Reservation #: 267226  
Guest: KERNAN, SCOTT  
T/A #:

Reserved Date	Status	Arrival Date	Ngts	Depart. Date	Room Type	Adt	Chd	Gid	By	Rate Code	Rate	Tax	BW	Conf#
2/1/2010	Reserved	2/3/2010	1	2/4/2010	KNS	1	0	VS		GROUP	\$84.00	Y		267195
											Rate Change			
											Rate Change			

KERNAN, SCOTT  
1515 S STREET  
SACRAMENTO, CA 95811

Thank you for choosing  
PASO ROBLES INN

**Gaddi, Kathy@CDCR**

---

**From:** Eaton, Kimberly@CDCR  
**Sent:** Monday, February 01, 2010 3:29 PM  
**To:** Gaddi, Kathy@CDCR  
**Subject:** FW: Embassy Suites Confirmation #85075282


Kimberly Eaton  
Assistant to Ben Rice, General Counsel  
Ca. Dept. of Corrections and Rehabilitation  
1515 S Street, Suite 502 s  
Sacramento CA 95811

916-341-7014 office  
916-442-2637 fax


---

**From:** Embassy Suites Confirmed [mailto:embassysuites@res.hilton.com]  
**Sent:** Monday, February 01, 2010 3:22 PM  
**To:** Eaton, Kimberly@CDCR  
**Subject:** Embassy Suites Confirmation #85075282

## Your reservation is confirmed




EMBASSY  
SUITES®



### Embassy Suites San Luis Obispo

333 Madonna Road  
San Luis Obispo, CA  
United States, 93405  
Tel: 805-549-0800  
Fax: 805-543-5273

[Directions to Hotel](#)  
[5-Day Weather Forecast](#)  
[Local Guide](#)



Embassy Suites® offers you the convenience of pre-ordering your choice of snacks, beverages - even extra towels. [Place your order now](#) for delivery to your suite before arrival.

**Make the Most of Your Stays**  
Join Hilton HHonors®

**Confirmation Number:** 85075282

> [Click here](#) to view or edit your reservation.

Name:	Scott Kernan
Arrival Date:	04 Feb 2010
Departure Date:	05 Feb 2010
Check-in Time:	3:00 PM
Check-out Time:	12:00 PM

**Rate Information:**

Rate Type:	STATE GOVERNMENT
Rate per night:	84.00 USD
Total for Stay per Room:	
Rate	84.00 USD
Taxes	10.14 USD
Total	94.14 USD

for free and whenever you stay at a participating Hilton Family hotel worldwide, you'll earn both HHonors points AND airline miles for your stay.

[Join Now](#)

[Book your next stay now](#)

Earn 15,000 HHonors points after making \$150 in purchases with the [Citi® Hilton HHonors Visa® Signature Card](#). Get the card to earn HHonors points faster toward rewards nights!



Hilton HHonors® has partnered with the **International Federation of Red Cross and Red Crescent Societies** to help victims affected by the January 12th earthquake in Haiti. If you would like to join us in supporting the victims of the earthquake in Haiti by donating HHonors points please [visit us here](#).

**Total for Stay: 94.14 USD**

Includes estimated taxes and service charges. (Gratuities not included.)

**Tax:**

- There is a 10.00% Per Room Per Night tax and a 0.07% Per Room Per Night secondary tax and a 2.00% Per Room Per Night tertiary tax.

**Additional Charges:**

- Self parking: 0.00/night

**Rate Rules and Cancellation Policy:**

- Your reservation is guaranteed for late arrival.
- Please contact us should you need to cancel your reservation.
- Cancellations are required by 4PM on 03 Feb 2010 local hotel time.
- Cancellation penalties may apply.

**Room Information:**

Rooms: 1  
Clients: 1 Adult  
Room Type: 1 KING BED NONSMOKING

**Embassy Suites Offers:**

**Golf Hero Wanted Sweepstakes**

Book and complete a stay between now and March 31, 2010 using your Visa® card and be entered for a chance to win the ultimate buddies golf trip to Puerto Rico.\* [Learn more](#).

- ① Complimentary, cooked-to-order breakfast, ② Two-room suites,  
③ Open-air atriums and ④ Evening Manager's Reception†.

For additional information, visit [embassysuites.com](http://embassysuites.com) or call 800-EMBASSY.

**Our Hotel:**

- [Experience our Fitness by Precor facility](#)
- [Tour the Hotel](#)
- [Accommodations](#)
- [Hotel Services and Amenities](#)

**Dining Options:**

- [On-site Dining](#)

**Sign up for weekly email offers from Embassy Suites Hotels!**



CONRAD  
A HILTON HOTEL



\* Two-room suites are based on booked room type and/or are subject to availability.

† Subject to state and local laws. Must be of legal drinking age.

If you need to MODIFY or CANCEL your reservation, [click here](#).

Any change to the arrival date, departure date or room type of this reservation is subject to the hotel's availability at the time the change is requested and may result in a possible rate change or an additional fee. For example, shortening or lengthening your reservation is subject to availability and may not be possible at a later date. For more information, please [click here](#) to see all the rules and restrictions applicable to this reservation.

If you have questions regarding your reservation, please contact Hilton Reservations and Customer Care at 1-800-EMBASSY (362-2779), visit us at [www.embassysuites.com](http://www.embassysuites.com), or email us at [embassyhelp@hiltonres.com](mailto:embassyhelp@hiltonres.com).

Hilton HHonors membership, earning of Points & Miles®, and redemption of points are subject to [HHonors Terms and Conditions](#).

**ABOUT THIS EMAIL**

Please do not reply to this email. Mail sent to this address cannot be answered. For a full description of our privacy policy, please [click here](#).

**Update Your Profile**

Ensure you receive the most relevant information from Hilton Worldwide and manage your email subscriptions by [signing in and updating your profile](#).

**Unsubscribe**

To unsubscribe from all marketing email from Hilton Worldwide, please send an email with the subject line "Unsubscribe" to [e\\_opt\\_out@hilton.com](mailto:e_opt_out@hilton.com). Opting out from all Hilton Worldwide marketing email will prevent you from receiving your monthly HHonors My Way Activity Statement.

Please allow up to 10 business days for processing opt-out requests. You will continue to receive transactional email messages such as reservation confirmations.

If you prefer to unsubscribe via postal mail, please send your name, HHonors Account Number (if applicable) and email address to Hilton Internet Contact Center, 2050 Chennault Drive, Carrollton, Texas, 75006, USA.

Notice of Confidentiality: This message and any attachments may contain confidential information. If it has been sent to you in error, please reply to advise the sender of the error and then immediately delete this message.

™ indicates a trademark of Hilton Worldwide.

©2010 Hilton Worldwide

[Hilton Reservations and Customer Care](#) | 2050 Chennault Drive | Carrollton, Texas 75006, USA



Sacramento Int'l  
Airport

Cashier : 76 Seq # 28952  
License Plate : XX NOPLATE  
Ent : 12:57 02/09/10 Lane 39  
Exit: 17:57 02/10/10 Lane 56

FEE \$	30.00
AMOUNT TEND \$	30.00
CASH \$	30.00
CREDIT CARD \$	0.00
CHECK \$	0.00
CHANGE CALC \$	0.00

PAID AT CT \$ 30.00  
Taxes Included

\*\*\* Start Calculation Details \*\*\*

2 Day(s) @\$15.00 = \$30.00

\*\*\* End Calculation Details \*\*\*

\*\*\* Thank You \*\*\*

OXFORD SUITES  
1651 W AVENUE K  
LANCASTER, CA. 93534-59

TERMINAL ID: 0017340000022807994002

MERCHANT #: 0022807994

VISA \*\*\*\*\*8085 SRV: 3

CHECK-OUT

BATCH: 000043 INVOICE: 000124

DATE: FEB 10, 10 TIME: 08:04

AUTH NO: 059699

## OXFORD SUITES LANCASTER

1651 WEST AVENUE K

LANCASTER, CA 93534

Phone No. 661-949-3423 Fax No.

reservations-lan@oxfordsuites.com

Page: 1 of 1

ROOM #: 310  
FOLIO#: 124  
CHECK-IN : 02/09/10  
CHECK-OUT: 02/10/10  
LENGTH OF STAY: 1  
AUTH AMOUNT: \$150.00

Man (Main Folio)  
Jadalupe Dr  
Murieta, CA 95683 USA

TOTAL \$117.77

Room #: 310

Confirmation #: 913863C1290510

Status: FOL

Depart: 2/10/2010

CUSTOMER COPY

2/9/2010 ROOM CHARGE - Room #: 310  
2/9/2010 LANCASTER CITY TAX - Room #: 310  
2/9/2010 CA TOURISM TAX - Room #: 310  
2/10/2010 VISA - PAYMENT

\*\*\*\*\*8085

Charges Credits

110.00

7.70

0.07

117.77

Folio Balance

0.00

Signature: \_\_\_\_\_

Lee Torrico  
City Hall